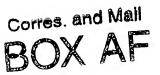
PTO/SB/17 (12-04)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE on Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

ENT&TR	Trective on 12/08/2004.		Complete if Known			
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818)		Application Number 10/809,360				
FEE TRANSMITTAL		Filing Date March 26, 200		4		
For FY 2006		First Named Inventor KENJIRO HOR		RI		
Applicant claims small entity status. See 37 C.F.R. 1.27		Examiner Name Tu B. Hoang				
		Art Unit 3742				
TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. 03500.017985						
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 06-1205 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17 Charge fee(s) indicated below, except for the filing fee X Credit any overpayments						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
FEE CALCULATION						
Application Type Utility Design Plant Reissue	ARCH, AND EXAMINATION FEES FILING FEES SEA Small Entity Fee (\$) Fee (\$) Fee (\$) 300 150 500 200 100 100 200 100 300 300 150 500	Small Entity Fee	100 100 60 60 80	Fees Paid (\$)		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Each independent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims						
Indep. Claims	Extra Claims Fee(\$)	Fee Paid (\$)		0		
2 - 3 or HP = 0 x 0 = 0 HP = highest number of independent claims paid for, if greater than 3						
3. APPLICATION SIZE FEE If the specification, drawings, and any Preliminary Amendment exceed 100 sheets of paper in total, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)						
100 = / 50 = (round up to a whole number) x =						
4. OTHER FEE(S) Fees Paid (\$)						
Non-English Specification, \$130 fee (no small entity discount)						
Other:						
SUBMITTED BY						
Signature	704	Registration No. (Attorney/Agent)	30,110	Telephone 212-218-2100		
Name (Print/Type)	Lawrence A. Stahl			Date: June 9, 2006		

LAS:eyw





BOX AF RESPONSE UNDER 37 C.F.R. § 1.116 EXPEDITED PROCEDURE EXAMINER GROUP 3742

03500.017985

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
KENJIRO HORI	:	Examiner: Tu B. Hoang
Annication No. 10/200 260	:	Group Art Unit: 3742
Application No.: 10/809,360	;	Confirmation No.: 7573
Filed: March 26, 2004)	
For: HEATER DRIVE CIRCUIT	,	June 9, 2006
Mail Stop AF		
COMMISSIONER FOR PATENTS		
P.O. Box 1450		
Alexandria, Virginia 22313-1450		

AMENDMENT AFTER FINAL REJECTION

Sir:

In response to the Office Action mailed March 9, 2006, Applicant submits the following amendments and remarks.